

Best Available Copy

CLAIMS ONLY						SERIAL NO.	FILING DATE			
						APPLICANT(S)				
CLAIMS										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51			
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44		/					94			
45		/					95			
46							96			
47	/	/					97			
48		/					98			
49		/					99			
50	/						100			
TOTAL IND.			↓			↓				
TOTAL DEP.			←			←				
TOTAL CLAIMS										

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS